UNITED STATES PATENT AND TRADEMARK OFFICE

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/927,972	08/10/2001	Woodrow W. Grandy	1904.101	5997

30973 7590 08/10/2007	EXAMINER
SCHEEF & STONE, L.L.P. 5956 SHERRY LANE SUITE 1400 DALLAS, TX 75225	BLACK, LINH

ART UNIT	PAPER NUMBER
2163	

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Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

PTOL-90A (Rev. 04/07)

Office Action Summary	Application No.	Applicant(s)
	09/927,972	GRANDY ET AL.
	Examiner	Art Unit	
	LINH BLACK	2163	

-- The MAILING DATE of this communication appears on the cover sheet with the correspondence address --

Period for Reply

A SHORTENED STATUTORY PERIOD FOR REPLY IS SET TO EXPIRE _3_ MONTH(S) OR THIRTY (30) DAYS, WHICHEVER IS LONGER, FROM THE MAILING DATE OF THIS COMMUNICATION.
- Extensions of time may be available under the provisions of 37 CFR 1.136(a). In no event, however, may a reply be timely filed after SIX (6) MONTHS from the mailing date of this communication.
- If NO period for reply is specified above, the maximum statutory period will apply and will expire SIX (6) MONTHS from the mailing date of this communication.
- Failure to reply within the set or extended period for reply will, by statute, cause the application to become ABANDONED (35 U.S.C. § 133).
  Any reply received by the Office later than three months after the mailing date of this communication, even if timely filed, may reduce any earned patent term adjustment. See 37 CFR 1.704(b).

Status

1)☒ Responsive to communication(s) filed on _25 May 2007_.

2a)☒ This action is **FINAL**.   2b)☐ This action is non-final.

3)☐ Since this application is in condition for allowance except for formal matters, prosecution as to the merits is closed in accordance with the practice under *Ex parte Quayle*, 1935 C.D. 11, 453 O.G. 213.

Disposition of Claims

4)☒ Claim(s) _1,5,7-17 and 27-55_ is/are pending in the application.

    4a) Of the above claim(s) _2-4,6-8 and 18-26_ is/are withdrawn from consideration.

5)☐ Claim(s) _____ is/are allowed.

6)☒ Claim(s) _1,5,7-17 and 27-55_ is/are rejected.

7)☐ Claim(s) _____ is/are objected to.

8)☐ Claim(s) _____ are subject to restriction and/or election requirement.

Application Papers

9)☐ The specification is objected to by the Examiner.

10)☐ The drawing(s) filed on _____ is/are: a)☐ accepted or b)☐ objected to by the Examiner.

    Applicant may not request that any objection to the drawing(s) be held in abeyance. See 37 CFR 1.85(a).

    Replacement drawing sheet(s) including the correction is required if the drawing(s) is objected to. See 37 CFR 1.121(d).

11)☐ The oath or declaration is objected to by the Examiner. Note the attached Office Action or form PTO-152.

Priority under 35 U.S.C. § 119

12)☐ Acknowledgment is made of a claim for foreign priority under 35 U.S.C. § 119(a)-(d) or (f).

    a)☐ All   b)☐ Some * c)☐ None of:

      1.☐ Certified copies of the priority documents have been received.

      2.☐ Certified copies of the priority documents have been received in Application No. _____.

      3.☐ Copies of the certified copies of the priority documents have been received in this National Stage application from the International Bureau (PCT Rule 17.2(a)).

    * See the attached detailed Office action for a list of the certified copies not received.

Attachment(s)

1) ☒ Notice of References Cited (PTO-892)

2) ☐ Notice of Draftsperson's Patent Drawing Review (PTO-948)

3) ☐ Information Disclosure Statement(s) (PTO/SB/08)
    Paper No(s)/Mail Date _____.

4) ☐ Interview Summary (PTO-413)
    Paper No(s)/Mail Date. _____.

5) ☐ Notice of Informal Patent Application

6) ☐ Other: _____.

DETAILED ACTION

This communication is in response to the Applicants' response dated 5/25/07. Claims

1, 5, 9-17, 27-55 are pending in the application. Claims 1, 29, and 35 are independent

claims.

Claim Rejections - 35 USC § 103

The following is a quotation of 35 U.S.C. 103(a) which forms the basis for all

obviousness rejections set forth in this Office action:

> (a) A patent may not be obtained though the invention is not identically disclosed
> or described as set forth in section 102 of this title, if the differences between the
> subject matter sought to be patented and the prior art are such that the subject
> matter as a whole would have been obvious at the time the invention was made
> to a person having ordinary skill in the art to which said subject matter pertains.
> Patentability shall not be negatived by the manner in which the invention was
> made.

Claims 1, 5, 9-14, and 35-37 are rejected under 35 U.S.C. 103(a) as being

unpatentable over Iliff (US 20010029322), and further in view of Rensimer et al.

(US 6154726).

As per claim 1, Iliff teaches user/patient's computer - fig. 24, item 2116, pars. 0330,

0585 (to provide services to its user community: patients, doctors, nurses, laboratories,

health management organizations), 0604; a plurality of templates/forms, each of the

templates showing a plurality of relevant inquiries and capable of accepting data entry

as yes/no entries by a user, said templates being accessible on the workstation or on a computer accessible by the workstation – pars. 0032, 0035, 0060, 0136, 0703-0705, 0721; and one or more sub-templates associated with at least a portion of said one or more inquiries for providing modifiers describing in further detail said at least a portion of said one or more inquiries - fig. 32, item 2592; pars. 0136, 0274-287, 0703, 0732 (subsequent form/template); fig. 10a, items. 472-480; fig. 33. (Applicants teach the limitation modifier in paragraph 0077, page 16 of 22 of the specification, "...for instance with the vomiting modifiers discussed above, it may be indicated that severe vomiting is present, that the vomit is blood tinged and contains frank blood..."); said one or more inquiries being configured for the entry of data relating to a medical condition of a patient, said computer further defining at least one database for storing and retrieving data relating to said one or more of said templates, inquiries, sub-templates and modifiers - pars. 0129, 0273, 0726, 0136, 0703-0705, 0721, fig. 6, item 260; pars. 0732-0734.

a screen, capable of displaying a <u>template/form</u> capable of receiving entries of yes/no data - fig. 33, item 2612; pars. 0014, 0029, 0133, 0566, 0703; displaying for further selection by a health care professional user said one or more inquiries associated with a selected template of said one or more templates, and said one or more sub-templates having modifiers associated with a selected one or more inquiries, for receiving and storing in said at least one database entries of yes/no data obtained by at least one of observation, testing or and examination of a medical condition of a patient by a health care professional user – pars. 0136, 0703-0705, 0721, fig. 32, item

2592; pars. 0274-285; Iliff teaches the MDATA system checks for and responds to changing conditions over time – pars. 0027, 0033-0035.

a language program accessible by the workstation and capable of producing a language text report based on said data entered, said report utilizing said modifiers to summarize at least portion of said data – pars. 0009, 0034-0035, 0202, 0701-0703; fig. 3, items 170, 172.

Iliff teaches a computerized medical diagnostic and treatment advice system including network access – the title, par. 0014; provide services to its user community: patients, doctors, nurses, laboratories, health management organizations – par. 0585. Thus, Iliff's teachings allow the health care professional user e.g. doctors, nurses,...to access a selected database or template (as cited above). Even though Iliff teaches that patient can access the MDATA system to learn more about certain diseases/seeking medical diagnostic and treatment advice – par. – 0075, Iliff does not explicitly disclose "entering data obtained by a health care professional by observation, testing, examination". However, the Examiner finds that the health care professionals can also access the MDATA system and templates (pars. 0330, 0585), and there is no reason that the health care professionals e.g. doctors/nurses etc...cannot use the form to enter patients' answers during the physical examination processes. And Iliff does not acknowledge that the health care professionals cannot enter patients' answers into the MDATA system either. However, entering data obtained by a health care professional by observation, testing, examination into a medical system is not new in the art.

Rensimer et al. (US 6154726) teach system and method for recording patient

history data about on-going physician care procedures – the title; a system and method

permits physicians and other medical staff personnel to record, accurately and

precisely, the treatment or care given in a particular patient encounter – col. 1, lines 52-

66; figs. 3-6; col. 4, line 48 to col. 5, line 23; patient medical status – col. 1, lines 50-61;

col. 3, lines 35-45. Thus, it would have been obvious to one of ordinary skill in the art at

the time of the invention to combine Iliff's teaching with Rensimer's teaching to allow

users including patients, doctors, nurses, or health care professionals to enter data

received from the testings/examinations/observations of patients to the medical system

to better recording patients' history data, thus, helps health care professionals in making

timely and better decisions in serving/helping patients.

As per claim 5, Iliff teaches

wherein the database access display enables the selection of a template selector for

medical history, medical examination, medical course and medical discharge and

related matters – pars. 0017, 0035, 0464.

As per claim 9, Iliff teaches

select a sub-template for each of at least a portion of the template inquires, the sub-

template including more detailed inquiries for the selected template inquiry to enable the

user to enter more detailed data by yes/no entries – pars. 0032, 0035, 0136, 0274-

0287, 0703-0705, 0721, 0732 (subsequent form/template); fig. 10a, items. 472-480; fig.

33.

As per claim 10, Iliff teaches wherein the language program produces an English

language text report of the entered data – pars. 0009, 0202, 0675, 0739.

As per claim 11, Iliff teaches wherein the workstation is programmed to access

additional databases of said at least one database – pars. 0196, 0237, 0560.

As per claim 12, Iliff teaches receive, distribute or direct distribution of all or selected

portions of the entered data to at least one identified recipient or database – pars. 0273,

0739, 0750.

As per claim 13, Iliff teaches store the entered data and maintain a record of distribution

of the entered data – pars. 0035-0036, 0083.

As per claim 14, Iliff teaches wherein the selected portions of the data are distributable

automatically to the identified recipients or databases according to programmed

instructions – pars. 0009, 0216, 0413.

Claims 15-17 are rejected under 35 U.S.C. 103(a) as being unpatentable over Iliff (US 2001/0029322), Rensimer et al. (US 6154726), and further in view of Florance et al. (US 6871140).

As per claims 15 and 17, Iliff and Rensimer et al. do not explicitly suggest a single sentence report. However, in any field of services or businesses, a single sentence report or plural sentences report are well known, it depends on the users' needs. Florance et al. teach one-line, multi-lines reports – col. 54, lines 17-21. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine Iliff and Rensimer et al.'s teachings with Florance et al.'s teaching in order to efficiently provided needed information to users.

As per claim 16, Iliff teaches forms and modifiers – pars. 0703; fig. 32, item 2592; pars. 0274-285. (Applicants teach the limitation modifier in paragraph 0077, page 16 of 22 of the specification, "...for instance with the vomiting modifiers discussed above, it may be indicated that severe vomiting is present, that the vomit is blood tinged and contains frank blood..."); Iliff also teaches the problem screening questions to determine patients' level of sickness or if patents need immediate attention - pars. 0274-285. Thus, users' entries to answer questions inherently allowed modifiers' adjectives to be modified such as severe headache/vomiting or little headache/vomiting etc...

Claims 27-31 are rejected under 35 U.S.C. 103(a) as being unpatentable over Iliff (US 2001/0029322), Rensimer et al. (US 6154726), and further in view of Maes et al. (US 20020002502).

As per claims 27 and 28, Iliff teaches users can click/tap on the circle yes/positive response or no/negative response – fig. 33, item 2612. Iliff and Rensimer et al. do not explicitly teach using the backslash for a negative response. However, crossing out a negative selection/response in answering questions is not new in the art, either a cross out using double lines or single line as a back/forward-slash, it means the same thing that the answer is negative. Maes et al. teach a computer-based product brokering systems which generally provide information about products and allow a user to identify one or more desired products – par. 0003; crossing-out (i.e., negative selection of) a product – par. 0101.. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine Iliff's teaching, Rensimer et al.'s teaching with Maes et al.'s teaching in order to provide users an efficient way to quickly answer/indicate a negative selection/response.

As per claims 29-31, Iliff teaches user/patient's computer - fig. 24, item 2116, pars. 0330, 0585 (to provide services to its user community: patients, doctors, nurses, laboratories, health management organizations), 0604; authorizing access - fig. 6, items 250, 272, 276, pars. 0074, 0190, 0196-0198; a screen, capable of displaying a template/form capable of receiving entries of yes/no data - fig. 33, item 2612; pars.

0014, 0029, 0133, 0566, 0703; Iliff teaches the MDATA system checks for and

responds to changing conditions over time – pars. 0027, 0033-0035.

one or more templates/forms, each of the templates showing a plurality of relevant

inquiries and capable of accepting data entry as yes/no entries by a user, said

templates being accessible on the workstation or on a computer accessible by the

workstation – pars. 0136, 0703-0705, 0721; a sub-template for each of at least a portion

of the template inquires, the sub-template including more detailed inquiries for the

selected template inquiry to enable the user to enter more detailed data by yes/no

entries – pars. 0136, 0274-0287, 0703, 0732 (subsequent form/template); fig. 10a,

items. 472-480; fig. 33; providing the capability for a user to access a selected database

or a selected template – fig. 6, item 260; par. 0196; a plurality of modifiers related to and

associated with designated inquiries on at least a portion of the templates and at least a

portion of the specific sub-templates showing more detailed inquiries related to the

inquiries on the templates and sub-templates for the entry of additional data – fig. 32,

item 2592; pars. 0274-285. (Applicants teach the limitation modifier in paragraph 0077,

page 16 of 22 of the specification, "…for instance with the vomiting modifiers discussed

above, it may be indicated that severe vomiting is present, that the vomit is blood tinged

and contains frank blood…"); a retrievable database for storing and retrieving entered

data from at least one of the templates, sub-templates and modifiers – fig. 6, item 260;

pars. 0703, 0732-0734; a language program accessible by the workstation and capable

of producing a language text report of the entered data – pars. 0701-0702; fig. 3, items

170, 172; producing a language text report based on said data entered, said report

utilizing said modifiers to summarize at least portion of said data – pars. 0033-0035,

0125, 0204, 0701-0702; fig. 3, items 170, 172; relevant findings – pars. 0019, 0117,

0329, 0424; symptoms of a medical condition - pars. 0027, 0033-0035, 0201, 0269,

0284, 0287; facts/status of medical conditions - pars. 0027, 0033-0035, 0240.

Iliff teaches a computerized medical diagnostic and treatment advice system

including network access – the title, par. 0014; provide services to its user community:

patients, doctors, nurses, laboratories, health management organizations – par. 0585.

Thus, Iliff's teachings allow the health care professional user e.g. doctors, nurses,...to

access a selected database or template (as cited above). Even though Iliff teaches that

patient can access the MDATA system to learn more about certain diseases/seeking

medical diagnostic and treatment advice – par. – 0075, Iliff does not explicitly disclose

"entering data obtained by a health care professional by observation, testing,

examination". However, the Examiner finds that the health care professionals can also

access the MDATA system and templates (pars. 0330, 0585), and there is no reason

that the health care professionals e.g. doctors/nurses etc...cannot use the form to enter

patients' answers during the physical examination processes. And Iliff does not

acknowledge that the health care professionals cannot enter patients' answers into the

MDATA system either. However, entering data obtained by a health care professional

by observation, testing, examination into a medical system is not new in the art.

Rensimer et al. (US 6154726) teach system and method for recording patient history

data about on-going physician care procedures – the title; a system and method permits

physicians and other medical staff personnel to record, accurately and precisely, the

treatment or care given in a particular patient encounter – col. 1, lines 52-66; figs. 3-6; col. 4, line 48 to col. 5, line 23.

Iliff teaches users can click/tap on the circle yes/positive response or no/negative response – fig. 33, item 2612. Iliff and Rensimer et al. do not explicitly teach using the backslash for a negative response. However, crossing out a negative selection/response in answering questions is not new in the art, either a cross out using double lines or single line as a back/forward-slash, it means the same thing that the answer is negative. Maes et al. teach a computer based product brokering systems which generally provide information about products and allow a user to identify one or more desired products – par. 0003; crossing-out (i.e., negative selection of) a product – par. 0101. Thus, it would have been obvious to one of ordinary skill in the art at the time of the invention to combine Iliff's teaching, Rensimer's teaching with Maes et al.'s teaching to allow users including patients, doctors, nurses, or health care professionals to enter data received from the testings/examinations/observations of patients to the medical system to better recording patients' history data, thus, helps health care professionals in making timely and better decisions in serving/helping patients. In addition, not only that users can circle an answer indicating that is positive, users can also cross out an answer indicating a negative response to the question, thus, provide users an efficient way to quickly answer/indicate a negative/positive selection/response.

Claims 35-37 claim the same subject matter as of previous claims and are rejected based on the same ground of rejection.

Claims 52-55 are rejected under 35 U.S.C. 103(a) as being unpatentable over Iliff (US 2001/0029322), Rensimer et al. (US 6154726), and further in view of Rothschild et al. (US 20020016718).

As per claims 52-55, Iliff teaches accessing the database to identify medical records stored therein – par. 0035; distributing said medical records according to at least one selected distribution option via at least one communication means – pars. 0241, 0728, 0732, 0241; retaining said database a record of the medical records sent the address to which the medical records were distributed – 0655-0656, 0661; output decives connected to client computer to post information – 0033-0035; information/articles pertaining to a particular topic can automatically be requested and the information used to update the system – pars. 0491-0492; output . Iliff do not explicitly suggest retaining the address to which the medical records were distributed. Rothschild teaches medical image management and method – the title; transmitting image files/medical records – par. 0104; retaining in a database a record of the distribution of the medical records sent with locations – pars. 0037, 0068, and 0072. Thus, it would have been obvious to one or ordinary skill in the art at the time of the invention to combine Iliff's teaching, Rensimer's teaching with Rothschild's teaching in order to keep good records of communications and services to users.

Claims 38-51 are rejected under 35 U.S.C. 103(a) as being unpatentable over Iliff (US 2001/0029322), Rensimer et al. (US 6154726), and further in view of Budzinski et al. (US 6609091).

As per claims 38-42, Iliff teach select one or more words...including said modifiers – fig. 23, items 892-906; par. 0240 (modifier: hvi positive); Iliff and Rensimer do not explicitly teach combine one or more words into a single sentence...adding punctuation, forming a phrase, common branch, independent branches, adding conjunctive to a sentence. Budzinski teaches generation of outgoing natural language, word isolation, parsing/ phrases, modifiers – col. 4, line 64 to col. 5, line 25; fig. 4a-b; col. 33, lines 25-60 (branches); col. 95, lines 28-41; col. 110, lines 34-67 (conjunctives); negative and positive truth values – col. 239, line 41 to col. 240, line 14. Thus, it would have been obvious to one or ordinary skill in the art at the time of the invention to combine Iliff's teaching, Rensimer's teaching with Budzinski's teaching in order to allow sufficient generating reports for users.

Claims 43-51 claim the same subject matter as of claims 38-42 and are rejected based on the same ground of rejection.

Response to Arguments

Applicant's arguments filed 5/25/07 have been fully considered but they are not persuasive. Regarding the Applicants' argument on page 15 that Iliff fails to either teach or suggest templates, inquiries, sub-templates, or modifiers selected by a user for response. Examiner disagrees. Iliff teaches a template: figure 23 shows a menu-driven treatment Selection process; paragraphs 0703-0705, 0721 teach the user proceeds through a diagnostic process ...by completing or <u>answering screen-displayed FORMS</u>

or by pointing at an item on the display and clicking with a mouse. Thus, clicking on

items on menu could provide forms for users to answer, thus, Examiner interprets a

form is equivalent to a template and menu items can be selected by users and

associated forms would be displayed for users to answer questions; fig. 32, items 2582-

2584 teach user views FORM and enters requested data or answer to question; item

2592 teaches execution of algorithm causes SUBSEQUENT FORM to be sent to user.

Examiner interprets question in forms is equivalent to inquiry in templates and

subsequent form is equivalent to sub-template. Thus, based on a user' selection, an

appropriate form can be displayed for users to answer to questions.

Applicants teach the limitation modifier in paragraph 0077, page 16 of 22 of the

specification, "…for instance with the vomiting modifiers discussed above, it may be

indicated that severe vomiting is present, that the vomit is blood tinged and contains

frank blood…"

In paragraphs 0274-0287, Iliff teaches an example of a problem screening

question for headache: are you confused, lethargic, or less oriented than usual? The

limitations: confused, lethargic, or less oriented than usual do describe further in detail

said at least a portion of the previous query/question, thus, these are equivalent to the

Applicants' limitation: modifiers.

Applicants disclose receiving and storing in said at least one database entries of

yes/no data obtained by AT LEAST ONE OF observation, testing and examination of a

medical condition of a patient by a user. However, in a broad sense/meaning, a patient

can be a user who interacts with a menu-driven treatment Selection and answer screen-

displayed forms taught by Iliff at pars. 0703-0705. Paragraphs 0077, 0169, 0271, 0281-0283 also teach yes/no questions that a patient can further provide the patient's medical condition. Iliff teaches the MDATA provides services to its user community: patients, doctors, nurses, laboratories, HMOs – pars. 0585-0586; upload medical data collected by MDATA scripts from patients – par. 0633; download data to patient computers – par. 0636; print patient-oriented materials and reports and store patient medical data – par 0657-0659; email physician's reports – par. 0739; send reports to patients – par. 0746. Thus, users do have access to print out medical reports. The claim is broad that all features taught by the Applicants seems to be taught by the cited prior art. No further details about "a language program" is described in the Applicants' specification.

Conclusion

THIS ACTION IS MADE FINAL. Applicant is reminded of the extension of time policy as set forth in 37 CFR 1.136(a).

A shortened statutory period for reply to this final action is set to expire THREE MONTHS from the mailing date of this action. In the event a first reply is filed within TWO MONTHS of the mailing date of this final action and the advisory action is not mailed until after the end of the THREE-MONTH shortened statutory period, then the shortened statutory period will expire on the date the advisory action is mailed, and any extension fee pursuant to 37 CFR 1.136(a) will be calculated from the mailing date of
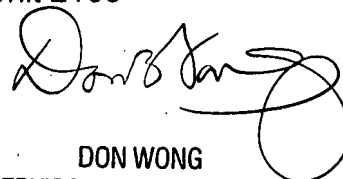
the advisory action. In no event, however, will the statutory period for reply expire later than SIX MONTHS from the mailing date of this final action.

Any inquiry concerning this communication or earlier communications from the examiner should be directed to LINH BLACK whose telephone number is 571-272-4106. The examiner can normally be reached on Mon.-Thurs.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Don Wong can be reached on 571-272-1834. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Information regarding the status of an application may be obtained from the Patent Application Information Retrieval (PAIR) system. Status information for published applications may be obtained from either Private PAIR or Public PAIR. Status information for unpublished applications is available through Private PAIR only. For more information about the PAIR system, see http://pair-direct.uspto.gov. Should you have questions on access to the Private PAIR system, contact the Electronic Business Center (EBC) at 866-217-9197 (toll-free). If you would like assistance from a USPTO Customer Service Representative or access to the automated information system, call 800-786-9199 (IN USA OR CANADA) or 571-272-1000.

LINH BLACK
Examiner
Art Unit 2163

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